


(ATTACHMENT 3)

Document 2c



U.S. Department of Justice
MEMORANDUM
Federal Bureau of Prisons
FCI MCKEAN

DATE: 2-29-04


REPLY TO: L. CARLSON S.O.S.

SUBJECT: POSSIBLE ASSAULT

TO: INVESTIGATING LT.

ON 2-29-04 AT APPROX. 9:30AM, WHILE ASSIGNED AS THE COMPOUND #2 OFFICER, I REPORTED TO UNIT A-A FOR A POSSIBLE ASSAULT, AT THAT TIME I ESCORTED INMATE BAKER #19613-039 TO THE LT. OFFICE, THEN TO THE INSTITUTIONAL HOSPITAL, THEN TO SHU. AFTER THE 10:00AM COUNT I REPORTED TO UNIT A-A, AND ESCORTED INMATE # TO THE LT. OFFICE, THEN TO THE INSTITUTIONAL HOSPITAL, THEN TO SHU.

Document 2d

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons

INMATE INJURY ASSESSMENT AND FOLLOWUP
(Medical)

1. Institution FCI McKean	2. Name of Injured BAKER, DARRYL	3. Register Number 19613-039
4. Injured's Duty Assignment Unicon	5. Housing Assignment A19	6. Date and Time of Injury 2/27/04 2000hr
7. Where Did Injury Happen (Be specific as to location) Housing A19 Cell #129	Work Related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8. Date and Time Reported for Treatment 2/29/04 0950hr
9. Subjective: (Injured's Statement as to How Injury Occurred)(Symptoms as Reported by Patient) 41 y/o MALE C/O LT. Face & Eye Pain 2° Assault by 2-Im's & LOC. Also 2° Minor Pain Swelling Bruising of RT Chest & Back, RUE, BIL. HANDS. (3) Reports Epistaxis Epistaxis - 1st 24hr S/P & Darryl Baker (4) C/O Resolving 2° Parasthesia LT Face & Maxilla dentition		
10. Objective: (Observations or Findings from Examination) CAD3, Mod distress, Ambulatory, Flat affect		X-Rays Taken <input type="checkbox"/> Not Indicated <input checked="" type="checkbox"/> X-Ray Results
HEAD → NC/AT: EARS → BLD, TMS DISTACT & FLD. BLD.; FACE → LT. mild tender & ecchymosis & swelling & STEP-OFF/DEFORMITY; SKIN intact & 2° Periorbital ecchymosis/edema & tend & STEP-OFF: NOSE → nasal RT PYRAMID & TIP = MILD ecchymosis LT lateral NOSE → 2° DYS-RT, BILAT. MUCCAL EDEMA. LT RT & DRIED & FRESH BLD. LEFT & VISIBL RUPTURE; CHEST/BACK + US'S (See DIAGRAM); NEURO → CUS II-III intact; PERRLA, LT. CONJUNCTIVITIS; EOMI		
11. Assessment: (Analysis of Facts Based on Subjective and Objective Data) (1) Periorbital Soft Tissue Trauma Ecchymosis/Edema & FX (2) Epistaxis & FX. (2) LT. MAXILLA 2° trauma contusion & FX (4, 25) Contusions, sprain (3) CONTUSION & ABRASION (superficial) & Superficial abrasions		
12. Plan: (Diagnostic Procedures with Results, Treatment and Recommended Follow-up) (1) Epinephrine 3cc Topical LT. NOSE x 1 (2) Epistaxis Prophylaxis Instructions. (2) Smell eye Exam Acuity @ 20/25 Bilat (3) Educate Counsel re. Trauma & RTC-PRN (4) Understands		
13. This Injury Required: <input type="checkbox"/> a. No Medical Attention <input checked="" type="checkbox"/> b. Minor First Aid <input type="checkbox"/> c. Hospitalization <input type="checkbox"/> d. Other (explain) <input type="checkbox"/> e. Medically Unassigned <input type="checkbox"/> f. Civilian First Aid Only <input type="checkbox"/> g. Civilian Referred to Community Physician	<p>Diagrams showing injury locations on the head, back, and front views of the patient. Numbered circles indicate specific injury sites: 1 (eye), 2 (nose), 3 (face), 4 (hand), 5 (chest/back), 6 (hand), 7 (nose), 8 (face), 9 (hand), 10 (chest/back).</p>	
Signature of Physician or Physician Assistant Robert E. Plotrowski, PA-C	Self Carboned Form - If ballpoint pen is used, PRESS HARD 2/29/04	

Original - Medical File
Canary - Safety
Pink - Work Supervisor (Work related only)
Goldenrod - Correctional Supervisor